

Boscobel High School  
300 Brindely Street  
Boscobel WI 53805

## Building Use Request

Please Read Attached Policy 7510

Phone: 608-375-4161

Fax: 608-375-264

### Section 1

Name of Organization: Rhonda Zart

Date: 12-16-19

Person Responsible: Rhonda Zart

Phone: 608-485-2839

Address: 411 E Bluff St

Room/Facility Requested: Choir room

Type of Activity: piano recital

Date Needed: Jan 6, 2020

Time: 6:00 PM to 8:15 PM

(Include set up time and tear down time if applicable) NOTE: A custodian will be required for all building use requests.

List all equipment needed (Bleachers, chairs, etc.):

Chairs & piano already in choir room

Will your organization sell concessions? No

Will your organization charge admission or take up a collection? No

Have arrangements been made for proper security? No

### Section 2

I acknowledge that I have received a copy of policy 7510-Use of District Facilities and will abide by its content.

Rhonda Zart  
Signature of Building Use Requestor

12-16-19  
Date

Walter F. Byrne  
Signature of Building Administrator/Athletic Director

12-17-19  
Date

\_\_\_\_\_  
Signature of Maintenance/Custodial

\_\_\_\_\_  
Date

\_\_\_\_\_  
Board Approval (if applicable)

\_\_\_\_\_  
Date

### Section 3 - Billing

☐ Building Use Fee  
(Prepaid)

☐ Custodian/Cafeteria Worker  
(Billed After Event)

☐ Other  
(Specify)

☐ No Charge

**Section 4** - This section will be completed after the date of your activity and mailed to you for billing purposes, if applicable.

Prepaid Building Use Fee:

= \$ \_\_\_\_\_

Custodian/Cafeteria Worker Name: \_\_\_\_\_  
\_\_\_\_\_ Hours X \$ \_\_\_\_\_ per hour

= \$ \_\_\_\_\_

Other Charges:

= \$ \_\_\_\_\_

**Total Amount Due:**

= \$ \_\_\_\_\_

Please make checks payable to Boscobel Area Schools